


AUG 14 2006


PTO/SB/21 (08-03)

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|---|----------------------|------------------------|---------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/558,351 | |
| | Filing Date | 11/23/2005 | |
| | First Named Inventor | Giorgio E. Cumadini | |
| | Art Unit | | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | BONNP18 |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm or Individual name | IP Strategies Thomas M. Champagne | |
| Signature |  | |
| Date | 08/14/2006 | |

| CERTIFICATE OF TRANSMISSION/MAILING | |
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| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | |
| Typed or printed name | Heather L. Pagella |
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| Application No. | Filing Date | First Named Inventor | Atty. Docket No. | Confirmation No. |
|---------------------------------|-------------|----------------------|------------------|------------------|
| 10/558,351 | 11/23/2005 | Giorgio E. Curradini | BONNP18 | |
| Invention | | | Examiner | Art Unit |
| Femoral Stem for Hip Prosthesis | | | | |

STATUS REQUEST

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please let us know the status of the above-identified application and when a notification of missing requirements can be expected.

Respectfully submitted,

August 14, 2006

Date



Thomas M. Champagne
Registration No. 36,478
IP STRATEGIES
12 1/2 Wall Street
Suite I
Asheville, North Carolina 28801
828.253.8600
828.253.8620 fax

TMC:hlp